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|                      | Tracy Dove          |     | 1795                                    |
|                      | Examiner            |     | Art Unit                                |
| Issue Classification | 10/804,342          |     | Johnson et al.                          |
|                      | Application/Control | No. | Applicant(s)/Patent Under Reexamination |

| ORIGINAL           |   |  |  |   |         | INTERNATIONAL CLASSIFICATION |   |      |   |  |             |   |   |          |  |
|--------------------|---|--|--|---|---------|------------------------------|---|------|---|--|-------------|---|---|----------|--|
| CLASS SUBCLASS     |   |  |  |   | CLAIMED |                              |   |      |   |  | NON-CLAIMED |   |   |          |  |
| 429 25             |   |  |  | н | 0       | 1                            | М | 8/04 |   |  |             |   |   |          |  |
| CROSS REFERENCE(S) |   |  |  | н | 0       | 1                            | М | 8/18 | _ |  |             | F |   |          |  |
| CLASS              | CLASS SUBCLASS (ONE SUBCLASS PER BLOCK) |  |  |   | Г       |                              |   |      |   |  |             |   |   |          |  |
| 429                | 19                                      |  |  |   |         |                              |   |      |   |  |             |   |   |          |  |
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|                    |   |  |  |   |         | Г                            |   |      |   |  |             |   |   |          |  |

|       | Claims renumbered in the same order as presented by applicant |       |          |       |          |       | CF       | 'A [  | ] T.D.   | ☐ R.1.47 |          |       |          |       |          |
|-------|---|-------|----------|-------|----------|-------|----------|-------|----------|----------|----------|-------|----------|-------|----------|
| Final | Original  | Final | Original | Final | Original | Final | Original | Final | Original | Final    | Original | Final | Original | Final | Original |
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|       | 2   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
|       | 3   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 2     | 4   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
|       | 5   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
|       | 6   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 3     | 7   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 4     | 8   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 5     | 9   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 6     | 10  |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
| 7     | 11  |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
|       |   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |
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|       |   |       |          |       |          |       |          |       |          |          |          |       |          |       |          |

|   | Total Claims Allowed: |                     |                   |  |  |
|---|-----------------------|---------------------|-------------------|--|--|
| (Assistant Examiner)                            | (Date)                | 7                   |                   |  |  |
| /TRACY DOVE/<br>Primary Examiner, Art Unit 1795 | 8/29/08               | O.G. Print Claim(s) | O.G. Print Figure |  |  |
| (Primary Examiner)                              | (Date)                | 1                   | 1                 |  |  |

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